

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration
Submitted
with Initial
Filing

OR

☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

8540 (GDM)

First Named Inventor

Alain Bouchard

COMPLETE IF KNOWN

Application Number

/

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence or post office address, and citizenship, are stated below next to my name.

I believe I am the original first and sole inventor of my invention which is listed below, or an original first and joint inventor. I believe names are listed below of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TECHNIQUE FOR PRINTING A COLOR IMAGE

The specification of which

Title of the invention☒ is attached hereto

OR

☐ was filed on MM/DD/YYYY

as indicated by Application Number or P.T. Number

Application Number and was filed on MM/DD/YYYY I herebythereby state that I have reviewed and understand the contents of the application, and I believe the same is not
amended by any amendment or specification feature.

I acknowledge the duty to disclose information which is material to patentability, as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a) for one or more of any foreign application(s) for patent or inventor's
certificate or foreign PCT international application(s) which is/are separate and distinct from any priority other than the United States of
America listed below and have also identified below by checking the box any foreign application for patent or inventor's certificate
or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
None	None		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO SB-012 attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO SB 012 attached hereto.
None	None	

[Page 1 of 2]

Based on the Statement, this form is estimated to take 14 hours to complete. Time will vary depending upon the needs of the
applicant. Any document in the area of a pending application to complete this form should be sent to the Director of the
Office, Patent and Trademark Office, Washington, DC 20590-1000. SEND FILES OR COMPLETED FORMS TO THIS
ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20590-1000.

DECLARATION — Utility or Design Patent Application

Priority is claimed under 35 U.S.C. § 119(a) and 35 U.S.C. § 122(b) and PCT international application designating the United States of America listed below and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. § 112. It is acknowledged the duty to disclose information is a duty of materiality, potentially as defined in 37 CFR 1.56, which became operative between the filing date of the prior application and the filing of this PCT international filing of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
None		

Additional U.S. or PCT international application numbers are listed for a subsequent request, and a second PCT filing is attached for a

As a named member, I herewith appoint the following to perform the duties of the President of the Club, and to transmit all business to the Club and Transmittal Office to the following:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Secretary		Club President

[illegible]

Name	Registration Number	Name	Registration Number
Gaetano D. Maccarone	25,173		

☐ Adult oral registered practitioner(s) named on supplement to Registration Practitioner Information sheet P10 SB UIC attached hereto.

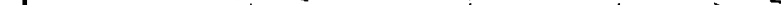
Direct all correspondence to ☐ Customer Number or Bar Code Label ☐ OR ☒ Correspondence address below

Name	Gaetano D. Maccarone, Esq.						
Address	Polaroid Corporation						
Address	784 Memorial Drive						
City	Cambridge			State	MA	ZIP	02139
Country	U.S.	Telephone	781-386-6405			Fax	781-386-6435

I hereby declare that all statements made herein in connection with this application are true and correct to the best of my knowledge and belief, and that I understand that any false statements made herein in connection with this application are prohibited by law and may render me liable to criminal sanctions (including fines and imprisonment) and/or civil sanctions (37 C.F.R. 1.56).

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle if any)	Family Name or Surname
Alain	Bouchard

Inventor's Signature		Date	2/10/10
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Residence: City	Boston	State	MA	Country	US	Citizenship	Canadian
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Post Office Address	27 Park Drive, Apt. 12
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Post Office Address	Same
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City	Boston	State	MA	ZIP	02215	Country	US
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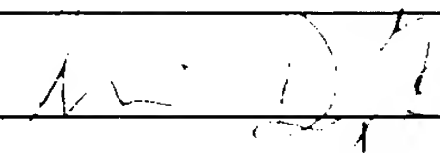
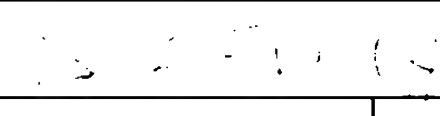
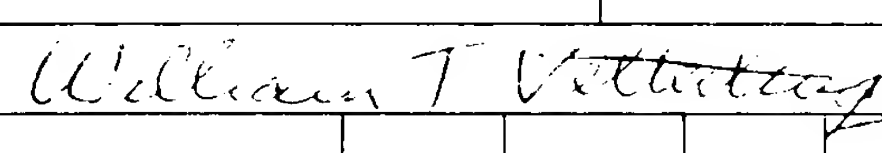
☒ Additional inventors are being named on the Supplemental Additional Inventors sheet(s) PTO SB 02A attached hereto.

Print type in places marked by this box → ☐

U.S. Patent and Trademark Office
Application for a Patent in the Field of Invention
Patent and Trademark Office, U.S. Department of Commerce
Patent and Trademark Office, U.S. Department of Commerce
Patent and Trademark Office, U.S. Department of Commerce

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Anemarie		DeYoung			
Inventor's Signature				Date	2/17/02
Residence: City	Lexington	State	MA	Country	U.S.
Post Office Address	6 Raymond Street				
Post Office Address	Same				
City	Lexington	State	MA	ZIP	02420
Country	U.S.				
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Stephen J.		Telfer			
Inventor's Signature				Date	2/17/02
Residence: City	Arlington	State	MA	Country	U.S.
Post Office Address	40 College Avenue				
Post Office Address	Same				
City	Arlington	State	MA	ZIP	02474
Country	U.S.				
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
William T.		Vetterling			
Inventor's Signature				Date	2/17/2002
Residence: City	Lexington	State	MA	Country	U.S.
Post Office Address	35 Turning Mill Road				
Post Office Address	Same				
City	Lexington	State	MA	ZIP	02420
Country	U.S.				

Declaration Statement: This form is intended to take no more than 10 minutes to complete. Time and space for completion of the form are limited. Any comments on the form or on the time you are required to complete this form should be sent to the Patent Information Office, Patent and Trademark Office, Washington, DC 20590. DO NOT SEND REPLY OR FURTHER INFORMATION TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20590.